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Sexuality education and sexual and gender minorities in school

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This thesis paper examines sexuality education and sexual and gender minorities (SGM) in schools. It focuses especially on the effects of heteronormativity on sexuality education and what this may indicate to the SGM adolescence's wellbeing in schools. These themes are pondered also in the Finnish context by examining Finnish and international studies about heteronormativity and its effect on sexuality education. This literature review is narrative in its nature and highlights the importance of inclusive sexuality education that meets the needs of sexual and gender minority youth.

This topic has not been researched very vastly in the Finnish context recently. In this thesis the focus is on heteronormativity and its effects on SGM youth's wellbeing especially in sexuality education but also in general in school. The results of this paper suggest heteronormativity and heteronormative practices causes invisibility of SGMs in sexuality education classes and schools, which in turn naturally affects their wellbeing. This paper investigates the possibilities and benefits a framework based on social justice and rights-based sexuality education could offer. It also looks at the challenges that may come with it based mostly on research done internationally.

Keywords: sexuality education, heteronormativity, queer theory, sexual and gender minorities

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# 1 Introduction

The motivation for making this thesis raises from a very personal perspective for me, having started from my reflections back to my own sexuality education in secondary school in Finland. I started gaining interest and reading research on this topic after reading about the results of a questionnaire (270 replies through the website) organized by Yle (Finnish National Public Broadcasting company), where it became clear that many Finns find their sexuality education lacking and heteronormative (Köngäs, 2020), which has been supported by other works as well (see for example Kuusela, 2016; Lehtonen, 2003b; Lehtonen 2016). I think it is time to look at our sexuality education critically to improve not only sexual and gender minorities' (hereafter SGM) wellbeing, but also the standards of sexuality education for all identities. As Nissinen (2011) also points out, it is worth questioning how teachers in Finland may receive Master's Degrees while learning little to nothing about the diversity of sexuality and gender, despite sexuality and gender being very important aspects of identity and health to many, especially those who do not fit in the heteronormative narrative. This is curious, seeing how the Finnish National Core Curriculum also recognizes that students' ideas of sexuality and gender develop during their basic education (Finnish Agency for Education, 2016).

A lot of issues related to health and identity could be reduced through inclusive sexuality education. Schools have a crucial role in providing practical, accessible, and public, free health information and health services, reaching a wide socio-economic spectrum of students (Schalet, Santelli, Russell, Halpern, Miller, Pickering, Goldberg & Hoenig, 2014). Most children and adolescents spend a great deal of their time in schools, building their identities. The public sexuality education received in Finnish schools may also be the only resource for some students in schools, if these themes are not talked of within e.g., the family or friends.

Hobaica & Kwon (2017) have covered that even though the internet is a resource for many SGMs, this can be counted under "privileged access", not available for all. It is to be noted that this privileged access refers to *private* access to Internet (Hobaica & Kwon, 2017). Some may not be able to afford this or have restrictions to gain access to it by having to use a public or family computer therefore not being able to comfortably access information about e.g., safe sex practice or their identity safely and privately (Hobaica & Kwon, 2017). In addition, the internet may have a lot of misinformation and hate speech e.g., about sexual minorities, making it not the best possible resource for examining and building one's identity, even though it remains a survival tool for many (Hobaica & Kwon, 2017; Juvonen, 2020).

With this, my research questions are along the lines of:

1. How does traditional sexuality education meet the needs of SGMs?
2. What could a rights-based inclusive sexuality education framework offer in comparison?

The goal of this thesis is to bring light to the needs of students who identify as SGM in the Finnish education system, specifically in sexuality education. To answer the first question, the implications, and possible shortcomings for the wellbeing of SGMs in traditional sexuality education will be looked at through the recent Finnish and international studies and the use of a model of wellness. The different types of sexuality education will also be gone through briefly and their different tactics and focuses will be examined. Lastly, to answer to the second question, the effects and possibilities of rights-based inclusive, comprehensive sexuality education pedagogy/framework will be investigated.

Literature reviews vary from one another, but three main types that can be separated are descriptive, systematic, and meta-analysis (Salminen, 2011). Salminen (2011) describes descriptive literature reviews to often be the most used and lenient in their nature. They can be further divided up into narrative and integrative reviews, of which this thesis will be narrative, and even further separated into the commentative style, intending to provide an easy-to-read general description of the themes and to raise discussion of the topic (Salminen, 2011). The aim is to present information on a specific topic and theory as well as recognize issues (Baumeister & Leary, 1997). I find that presenting this information may be helpful and interesting for future teachers and anyone interested in the wellbeing of SGMs. Especially in Finland, not a lot of research exists in this area, and I am interested to go further into this topic later in my studies and/or career, this thesis therefore also working as a way of building a theoretical and conceptual background.

A descriptive literature review, based on a research question, should provide a descriptive, qualitative answer and it is based on the material used, such as articles, and it aims to provide a description to understand a phenomenon (Kangasniemi et al., 2013). Working on this thesis, I have used these four areas of stages described by Kangasniemi et al. (2013): defining the research question by researching the public discussion of the topic and constructing mind maps,

choosing the material and creating a base from some main articles that appear often in thesis, such as Goldfarb & Lieberman (2021) or Hobaica & Kwon (2017), building the description, and reviewing the produced result(s). It is to be noted that even though these steps can be separated as such, they have naturally progressed in conversation with and over one another in the construction of this thesis (Kangasniemi et al., 2013).

Search terms that were used to find articles, were such as: sexuality education, sex education, comprehensive sex education, heteronormativity, and queer theory. Search engines included mainly EBSCOhost (with all databases selected) and Google Scholar. References in many articles were helpful in finding further information and core theories and other well-known pieces in areas such as queer theory and gender studies.

## 2 Gender, heteronormativity, and sexuality education

“As a culturally and socially produced construct ... heteronormativity is open to challenge.”

(Lehtonen, 2008, p. 98)

Queer theory, on which this thesis and many of the research referred to in this paper lean on, is striving to dismantle heteronormativity (Warner, 1991). Heteronormativity refers to the assumption of a person's heterosexuality and binary male-female idea of gender. Queer theory is all about critiquing and reminding of the privilege and obliviousness of heteronormativity in institutions, academia, pedagogy and so forth, delivering perspectives and collections to challenge unrecognized comforts of said privilege and ignorance (Berlant & Warner, 1995). It is not the theory of anything per se nor does it have precise literature for it (Berlant & Warner, 1995) as there is no agreed meaning of queer or its outline, other than the idea of critiquing and deconstructing, dismantling heteronormativity (Bjørby & Ryall, 2008). Berlant & Warner (1995) do also talk about the term “queer commentary” as alternative, describing it as a meaning of giving another perspective, a ‘queer perspective’. While this is the framework recognized in this thesis, it is important to practice criticality when reading queer theory from different contexts: especially when related to gender equality as queer theories from the United States may have issues that specifically concern the United States context and may not be relatable to the Finnish context in the same way (Mizielinska, 2006). The core subjects of this theoretical framework, gender, heteronormativity, and some basics of sexuality education, will be examined in the following.

### 2.1 Concept of gender and heteronormativity as framework

According to VandenBos & APA (2015), unlike ‘sex’ (“biological aspects of maleness or femaleness”), gender refers to “psychological, behavioral, social and cultural aspects” of being masculine or feminine and is a construct of these aspects used to classify people as male or female in society. Gender identity is a person's own self-identification of being male or female, or to fill this definition a bit more, non-binary. Gender identity, while experienced by individuals, is influenced by societal structures, cultural expectations, personal interactions, environmental and biological factors (VandenBos & APA, 2015). Most people identify as cis (Seta ry,

2021a), which refers to an identity where the gender assigned to a person at birth, matches with their gender identity and the way they express their gender (Setälä, 2021; Finnish Institute for Health and Welfare, 2020). It is the opposite term of trans (Setälä, 2021). Gender roles, the binary conception of gender (male-female) and gender identity are principal pieces of heteronormativity (Garcia, 2009; Honka, 2014; Lehtonen, 2003b, 2008) as by the assumption of heterosexuality, gender is also assumed, based on what is seen as ‘male’ or ‘masculine’ and ‘female’ or ‘feminine’ in society.

The definition of heteronormativity was coined by Warner (1991) as heterosexual privilege and heterosexuality being perceived as the, desirable, norm in society. Even if non-heterosexuality would be tolerated it would still not be considered as a wanted result of development, especially when related to family and raising children (Warner, 1991). The roots of the stigma against same-sex attraction and gender non-conformity can be assumed to be in the old, faulty classification of them as a disease or other abnormality to be cured (Valdiserri, Holtgrave, Poteat & Beyrer, 2019). For example, homosexuality was removed from World Health Organization’s (WHO) ICD-10 classification in 1993, Finland only following in 1996 (Nissinen, 2011), reflecting the view of medical professionals towards non-heterosexuals at the time.

Warner’s (1991) points can also be seen in Rich’s (1980/2003) feminist approach, which sees the idea of compulsory heterosexuality as one of the institutional ways women have been controlled with alongside the concept of nuclear family, and as a belief which insists and assumes heterosexuality. With these, heteronormativity can be seen, not only as the normative assumption of heterosexuality in our day-to-day life, but also as an institutional concept or ideology which is enforced overtly and implicitly through the practices in our institutions such as education (Garcia, 2009; Lehtonen, 2003b; Lehtonen, 2008). Anyone identifying outside this norm is seen on a scale of negativity, as undesirable, not recognized and so on (Rich, 1980/2003; Warner, 1991).

Heteronormativity is also said to promote “the norm of social life as ... also married, monogamous, white, and upper middle class” (McNeill, 2013, p. 827), therefore seeing the many ways of heteronormativity to be rooted in white supremacist ideology (Cohen, 1997, p. 453) and creating further limiting ideals for people to strive for. Furthermore, it restricts the conceptions of gender, creating a certain image of “heterosexual maleness and heterosexual femaleness” which “represent the natural, legitimate, desirable, and often the only possible alternatives of



being a human and a member of a work community” (Lehtonen, 2003b; Lehtonen, 2008, p. 98). This shows how heteronormativity also restricts gender identity, not only hurting gender minorities when their identity does not fit this ideal, but also creating gender roles for cis gender people. Today people are of course more open minded and for example gender roles are more lenient and breaking, but heteronormativity still exists and should be brought up due to its often invisible and hidden, normative nature.

## **2.2 Sexuality education**

Sexuality education has an aim to allow the learner to discover the many different aspects of sexuality, the functions of a sexual body and the importance of respecting sexual rights as human rights (Bildjuschkin, 2015). Defining ‘sexuality’ can help understand and open how sexuality education is not something limited to reproduction and encompasses for example gender identities and roles as well:

“Sexuality is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, ethical, legal, historical, religious and spiritual factors.” (WHO, 2006 p. 17).

I will use the term sexuality education rather than for example sex education in this thesis as it best describes the purpose of sexuality education as part of Health education as it is in Finland. As the term sexuality is wide, it therefore opens the education perspective up more instead of being restrained to reproduction- or disease-prevention focused model of sexuality education (WHO & BZgA, 2010).

The World Health Organization (WHO) and The Federal Centre for Health Education’s (BZgA) Standards for Sexuality Education in Europe (2010) contains a summarization of three sexuality education programmes in historical global perspective, divided into three groups as following:

1. Programmes which focus primarily or exclusively on abstaining from sexual intercourse before marriage, known as “how to say no” or “abstinence only” programmes (Type 1).
2. Programmes which include abstinence as an option, but also pay attention to contraception and safe sex practices. These programmes are often referred to as “comprehensive sexuality education”, as compared with “abstinence only” (Type 2).
3. Programmes which include the Type 2 elements, and also put them in a wider perspective of personal and sexual growth and development. These are referred to in this document as “holistic sexuality education” (Type 3). (p. 15)

Research has shown there not to be any positive impact from the described “abstinence only” programmes on sexual behaviour or the risk of teenage pregnancy, meanwhile the more comprehensive approaches do have positive results (Kohler, Manhart & Lafferty, 2008). The third perspective should clearly encompass the broader meaning and definition of sexuality. Type 2 which, while admittedly more comprehensive compared to type 1, is still focusing only on the physical act of sex and how to do it safely rather than also seeing sexuality in its broader concept. Nowadays the point of sexuality education is rather to give the assets to reflect one’s own attitude to questions related to sexuality, which can then be utilized to make the best possible choices for themselves (Bildjuschkin, 2015) and to navigate and challenge sexual and social inequalities (Connell & Elliott, 2009).

Sexuality education should therefore also go through the diversity of sexuality and consider SGMs. A literature review looking at three decades of research on comprehensive sexuality education, argues in its findings for the possibilities and positive results of a social justice or rights-based lens and framework on comprehensive sexuality education, inclusive sexuality education, showing “outcomes related to increased knowledge, awareness and appreciation of gender equity and sexual rights, and awareness of discrimination and oppression based on gender and sexual orientation” (Goldfarb & Lieberman, 2021, p. 19). Similarly, according to UNESCO (2018) comprehensive sexuality education is, or should be, given in settings that are: scientifically accurate, increasing in small steps of new information building on previous learning, age- and developmentally accurate, curriculum based, comprehensive, based on human

rights approach and gender equality, culturally relevant and context appropriate, transformative, and able to develop life skills needed to support healthy choices.

Looking at the situation in Finland, the Finnish National Core Curriculum for Basic Education (FNCC) recognizes how pupils' ideas of gender and sexuality develop during their time in basic education (Finnish Agency for Education, 2016). It also does not allow discrimination based on gender or sexual orientation, referring to the Finnish Constitution and the Non-Discrimination Act. Contents in the curriculum related to sexual development and human reproduction are listed as part of environmental studies in grades 3-6 and sexuality, sexual health and diversity of sexual development are listed as part of the subject Health in grades 7-9. There is no more specific instruction for sexuality education per se, as the theme is part of the health education subject. Health is seen as physical, mental, and social and the overlapping factors and causalities between these aspects are recognized in the curriculum (Finnish Agency for Education, 2016).

The principle for the task of the health education is "respect for life and a life of human dignity in compliance with human rights" (Finnish Agency for Education, 2016, p. 398). Guiding for critical thinking of the conceptions of health characterized by family and communities around the pupil as well as supporting the pupil's development of learning and utilizing information to act appropriately in situations related to health, safety and illnesses are some of the objectives of instruction (O6, O11) for health education in grades 7-9 (Finnish Agency for Education, 2016).

It would therefore seem that the Finnish National Core Curriculum 2014 should not be a hindrance to teaching comprehensive sexuality education as one that would be inclusive of SGMs, especially when seeing its principle laid in human rights for example. The SGM youth and those with parents belonging to SGMs in Finnish schools however do not often face positive feelings in school and sexuality education as they find the atmosphere heteronormative and ignorant to their and their families' existence though several assumptions towards their gender, sexual orientation, parents' gender and sexual orientation, and so on (Kuusela, 2016; Lehtonen, 2016; Lehtonen, 2003a; Tuovila, Åstedt-Kurki, Paavilainen & Kylmä, 2018). All these instances of queer issues mentioned in the FNCC also come off as lacking, as they provide little to no information in how to 'deal' with them (Kjaraan & Lehtonen, 2018), leaving the interpretation to individuals. National curriculum has its risks as these contents and values might not be implemented in the municipal curricula (Kuusela, 2016). Moreover, the Finnish education system is famous for being lenient with its practically non-existent monitoring and reporting for teaching,

which has its advantages with e.g. teacher autonomy but as can be seen here, also at least the disadvantage of not knowing whether national curriculum standards and values are being implemented in practice or not (Kjaraan & Lehtonen, 2018; Vainikainen, Thuneberg, Marjanen, Hautamäki, Kupiainen & Hotulainen, 2017; Webb, Vulliamy, Häkkinen & Hämäläinen, 1998). Teacher education programmes and how their contents regarding sexuality education and the diversity of gender and sexuality are lacking or non-existent may also be examined (Kjaraan & Lehtonen, 2018).

### 3 Heteronormative sexuality education

As discussed earlier, heteronormativity is an idea based on the assumption of two binary genders, male and female. Heteronormative ideas and practices based on this also then assume heterosexuality as at least the only desired sexual orientation in mundane life and institutions. In the following chapter I will see how these ideas affect the wellbeing of sexual and gender minorities in different dimensions of wellbeing and what kind of heteronormative practices may exist in schools.

#### 3.1 Health risks for sexual and gender minorities

As mentioned briefly before, effects raising from the assumption of heterosexuality and binary gender based on strict gender roles have an effect especially on SGMs health. I will look at these implications more carefully utilizing Hettler's (1976) interdependent 'Six Dimensions of Wellness Model' (see Table 1), employing research done in Finland and other parts of the world, because sexuality education is especially a part of the subject 'health education' in Finland and these classes could therefore be a place and time where many of these dimensions are discussed. The dimensions in the model are physical, social, emotional-mental, intellectual, spiritual, and occupational health and it was developed by the co-founder of the National Wellness Institute, Dr. Bill Hettler (Hettler, 1976). In this model the agreements regarding wellness are that:

- "Wellness is a conscious, self-directed and evolving process of achieving full potential
- Wellness is multidimensional and holistic, encompassing lifestyle, mental and spiritual well-being, and the environment
- Wellness is positive and affirming "

(National Wellness Institute, 2020).

The model is helpful for enhancing wellness for all youth, including SGMs, though through this we can see in which areas SGM youth's health is especially compromised (Elia, 2014). It should be noted that health risks do not require overt discrimination (name-calling, physical violence etc.), as silence, invisibility and feelings of exclusions affecting SGMs call for also addressing

the implicit discrimination SGMs face in schools at a young age (Hobaica & Kwon, 2017; Robinson & Espelage, 2013). Another important fact to consider is that there is also variety of differences for example regarding sexual risk disparities across SGM subgroups (Robinson & Espelage, 2013). The risks that not only, but especially SGMs face, can be seen as a systemic problem to battle against seeing that if these risks such as early pregnancies, STIs, sexual abuse and interpersonal violence and harassment can be avoided while experiencing feelings of safety and support in school environment, better academic success is more likely, leading to a better foundation for future stability (Goldfarb & Lieberman, 2021).

Table 1: Dimensions of wellness (Elia, 2014; Hettler, 1976)

<b>DIMENSION OF WELLNESS</b>	<b>DEFINITION</b>
<b>Physical health</b>	Getting sufficient sleep, good nutrition, regular physical exercise, discouraging the use of tobacco, alcohol, drugs, and such, not engaging in physical self-harm, ability to understand own body and its warning signs when feeling unwell
<b>Social health</b>	Upkeeping a ‘safety net’ of individuals to rely on, give assistance to, problem-solve, socialize, feel connection to, obtaining and providing social support; feeling safe and protected in the community, being able to give to the community
<b>Emotional-mental health</b>	Ability to communicate emotions appropriately and to deal with stressful situations; self-esteem, self-image, self-efficacy (A personal assessment of how well or poorly a person can deal with a situation based on their skills and circumstances (Bandura, 1977). )
<b>Intellectual health</b>	A curiosity to learn; thinking rationally and using cognition to accomplish daily needs, problem solving; creativity, stimulating mental activities
<b>Spiritual health</b>	Belonging to an organized religion or having belief in a higher power to guide one’s own value system

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	and life; pondering about self and existentialism, leading to finding meaning in a fulfilling life; actions consistent with values; world view
<b>Occupational health</b>	Personal satisfaction and development through one's work, utilizing personal talents, skills and gifts in an occupation that is personally meaningful and rewarding; safe working conditions supporting enjoyment of working, doing volunteer work and other mundane activities

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**Physical health.** Lesbian, gay, bisexual, transgender, and questioning (LGBTQ) -identifying youth partake in riskier sexual behaviour compared to their heterosexual peers and are also at higher risk of suicide (Robinson & Espelage, 2013). Heteronormativity completely disregards the health-related needs of SGMs and therefore they lack information and support regarding safe sex and risky health behaviour (Hobaica & Kwon, 2017). In the United States those identifying gay, lesbian and bisexual also reported higher rates of alcohol and cigarette usage (Ward, Dahlhamer, Galinsky, & Joestl, 2014). LGBTQ-inclusive sexuality education shows results of better health outcomes, for example less substance abuse of e.g., alcohol before sex and fewer sex partners, compared to those partaking in instruction that was not 'gay-sensitive' (Blake, Ledsky, Lehman, Goodenow, Sawyer & Hack, 2001). Interestingly, a nationwide questionnaire done in Finland shows that sobriety between SGMs and other youth is in the same rates in Finland, although it also reveals a grim reality of SGMs in Finland facing more physical threat than others, for example physical violence from parents or caretakers twice as frequently compared to other youth (Jokela, Luopa, Hyvärinen, Ruuska, Martelin & Klemetti, 2020). As Hettler's (1976) model is interdependent, it should of course be noted that such experiences and all these dimensions of wellness have connections and mutual causality to other dimensions of wellness as well.

**Social health.** Disparity in social health for SGMs can be seen for example among gay men and other men who have sex with men from fear of rejection by friends to fear of seeking health care and being in public, to other stigma (Stahlman et al., 2016). There may also be feelings of

exclusion as their lives, relationships, experiences and so forth are ignored and made invisible (Hobaica & Kwon, 2017). SGM youth in Finland reported feeling loneliness and that they had no close friends more frequently than other youth, a fourth of SGM youth reporting loneliness compared to the tenth of non SGM youth (Jokela et al., 2020) and increased risk in bullying (Klemetti, Luopa & Kivimäki, 2020). Discrimination is also experienced in schools, workplaces and when seeking healthcare, and the service provided is seen as not fitting for SGMs (Taavetti, Alanko & Heikkinen, 2015). Participation (*osallisuus*) was also experienced less within SGMs in Finland, although SGM youth were reported to practice hobbies with art and culture significantly more compared to other youth (Jokela et al., 2020). In Finland, especially trans youth have a need for creating social networks and a need for support in creating social networks as being trans is not as common as being gay and finding other trans friends may prove difficult in addition to battling with the transphobia not only in society but also inside LGBTQ+ groups (Alanko, 2014), which should also be addressed wholly and battled against as a reason of distress.

**Emotional-mental health.** Minority stress theory suggests adverse mental health among SGM to be a result of being stigmatized in society because of their minority status, leading to e.g., internalized homophobia (Meyer, 1995). If the school environment does not support the identity exploration for SGM youth, it could easily lead to feeling of not being ‘normal’ or invisibility, exclusion (Hobaica & Kwon, 2017), which in progress may spark or further complicate mental health issues. Many experience internalized homophobia, shame and self-blame about their identity after exclusion due to their identity, which has been reported to increase depression (Hobaica & Kwon, 2017). Heteronormative sexuality education may add to mental health concerns through the advancement of low self-confidence and efficacy and engagement in unhealthy sexual experiences (Hobaica & Kwon, 2017). It has been found that SGMs experience more mental health issues, with for example sexual minority youth in Finland showing significantly higher differences in experiences of depression (40.4 % vs. 14.5 %), anxiety (31.4 % vs. 10.4 %) and worrying about their mental health more often (65.6 % vs. 28.5 %) compared to their heterosexual peers (Klemetti et al., 2020). Research shows that sexuality education inclusive sexuality education relates to lower harmful mental health amongst sexual minority youth (Proulx, Coulter, Egan, Matthews, & Mair, 2019).



**Intellectual health.** This category has not been as researched among sexually fluid individuals (Elia, 2014), but some ideas may be taken and could be researched further for example from seeing how over half of the SGM youth in Finland felt they had difficulty in cognitive skills, for example doing homework and tasks requiring reading, writing and calculation meanwhile among other youth this was felt by 37-38 percent (Jokela et al., 2020). However, SGM youth in Finland do seem to partake in artistic and cultural hobbies more than other youth (Jokela et al., 2020) which can be associated with ‘creativity’ within intellectual health, although it may be argued that the full potential of this ‘intellectual health’ category is not reached or it is limited due to the exclusion, lack of involvement and invisibility (Elia, 2014) in heteronormative school climate.

**Spiritual health.** Spiritual health is an interesting portion of this as it is often seen for big mainstream organized religions to be more conservative and unsupportive towards SGMs (Elia, 2014). There are oppositions seen for example in forms of morality versus health or human rights versus religious rights, which are used for and against the themes of pleasure and desire in sexuality education (Rasmussen, 2012). Nevertheless, religious SGMs still exist, and this shows how one of many aspects of intersectionality, how different, more multifaceted identities may have more unique struggles that should be considered (Crenshaw, 1991); SGMs who are religious or more strongly part of religious communities may face different type of struggles than those who are not strongly connected to organized religions. Spirituality is an important part of identity for many and religious SGMs may find strength in their faith or other higher meaning, suggesting in no way it should be shunned or restricted from them. Self-examination may still prove problematic to deal with though, if the environment is not supportive of one’s sexuality (Elia, 2014).

This dimension of wellness differs vastly naturally based on context, depending for example on how strongly the state and religion are connected, if schools are all state regulated or also private and so on. For example, single faith-based schools in South Africa were found to prioritize religion teaching over comprehensive sexuality education, resulting in possibly only catering towards the rights of religious minorities but not for sexual minorities who were religious (Ubisi, 2021). Interestingly, recently there has been a publication by the Evangelical Lutheran Church of Finland, the largest religious denomination in Finland with 67,6 % of Finland’s population belonging to it in 2020 (Evangelical Lutheran Church of Finland, 2021a), about the

wellbeing of rainbow youth with an aim to advance understanding of SGMs wellbeing in parishes and other communities. The publication based on scientific research and constructed in collaboration with medical and sexual health experts for example recognizes how damaging conversion strategies are to SGMs health and sees the tensions and misinformation that still exist within the community about SGMs (Evangelical Lutheran Church of Finland, 2021b). This is obviously just one example of a religious community or organized religion in Finland, but it will be interesting to see what sort of shifts this will bring for SGMs in the Evangelical Church in Finland, considering it is the largest organized religion in the country.

**Occupational health.** This is another category that largely differs based on context, seeing how laws related to hiring and firing employees may differ vastly. For example, in the United States employment discrimination is a big concern for SGMs wellness because of the discriminatory laws existing related to hiring and firing (Lee, Chaney & Cabacungan, 2019). This employment discrimination results in “decreased physical and emotional well-being, lower wages and career advancement, and lower job satisfaction and productivity” (Sears & Mallory, 2014 as cited in DeSouza, Wesselmann & Ispas, 2017, p. 121). Even though discrimination at work being illegal and such discriminatory laws not existing in many countries, overt and implicit prejudice still exist with organizations and workplaces, forcing SGMs at work to often conceal their identities and private lives, be constantly wary of not becoming ‘outed’ and having to deal with questions, possibly preventing them from being their authentic selves (Di Marco, Hoel & Lewis, 2021; Lehtonen, 2014). There has not been as much research on this area in Finland, but it is known that SGM youth in Finland find school to be an unsafe environment in addition to workplaces and often this discrimination and unsafety is not addressed (Taavetti et al., 2015).

Lehtonen’s (2014) research found the interviewed SGMs to secret their sexual orientation or gender experience in workplaces due to normativity and to be afraid of the reactions they might get if their sexual orientation or gender identity is revealed as well as of inappropriate treatment at work. Although many good experiences of work exist, many also have negative experiences of the sexual orientation and gender norms at work. Trans youth appear to be the most vulnerable group, non-heterosexual men are affected more often than non-heterosexual women by gender norms and transfeminine people are affected more often than transmasculine people. Overall, trans youth are in a more vulnerable position in the workplace than non-heterosexual youth (Lehtonen, 2014).

### **3.2 Heteronormativity and heteronormative practices in schools**

Heteronormativity in sexuality education may render sexual and gender minorities invisible or as ‘the other’. It emphasizes the heterosexual way of relationships as the norm and assumes gender binarily as strictly male and female. It may appear for example as sex being discussed only as a mean of reproduction, relationships only as heterosexual and as discussing the way to have safe sex only as penile-vaginal (Lehtonen, 2003b). In the worst cases, the diversity of sexuality may be mentioned in a textbook, but only as a way of name checking out homosexuality, possibly bisexuality and these name checks are often presented as ‘the other’ compared to heterosexuality and not introduced much further than definition. Exposing heteronormative practices often raises motivation to question the phenomenon (Lehtonen, 2003b).

Lehtonen (2003b) presents ten heteronormative practices in schools which will be reflected in the following specifically on sexuality education if they were not already described in such context. This gathering of said practices is useful in showing how heteronormativity may exist in practice.

The very first practice is presenting heterosexuality as natural, something following the laws of nature, especially within sexuality education (Lehtonen, 2003b). This may also be seen as the personification and gendering of things. Meeting of plus- and minus signs or female and male animals may be related to (human) heterosexual attraction (Lehtonen, 2003b). These heteronormative practices are visible especially in science teaching, where science may be used as a tool to exclude non-normative bodies and identities, to restrict and construct allowed bodies and identities (Gunckel, 2019). It is curious how this ‘sole naturality’ of heterosexuality and binary, restricted views of how male and female bodies and identities exist are used as a tool and argument in science, when nature is very diverse in its sex morphologies and reproduction processes: many beings cannot be separated into male and female body types, many insects look the same, their sex not determining their looks, examples of homosexuality exist in the animal world and so on (Gunckel, 2019). In short, “The focus on differences between male and female body types and heterosexual reproduction makes invisible the wondrous variations that populate the natural world, of which humans are a part.”, preventing SGM children and children with non-normative bodies and identities from “seeing themselves and their families reflected in the natural world” (Gunckel, 2019, p. 73-74) and this mindset can be argued to be restricting also the way sexuality education is carried out.

Secondly, silence on gender and sexual diversity is also a way to upkeep a certain view of heterosexual femininity and masculinity, and it may show, as earlier mentioned, as only heterosexual relationships and sex being discussed in sexuality education (Kuusela, 2016; Lehtonen, 2003b). What is notable, is that these relationships and views are never explicitly described to be heterosexual, which would make heterosexuality visible and offer a space to question the chance of other possibilities. (Lehtonen, 2003b). Most often when the diversity of gender and sexuality is discussed, heterosexuality is not described as an option, assumably because it is seen as the norm rather than as one option of sexual orientation (Lehtonen, 2003b), creating a clear difference and binary of heterosexuality and ‘everything else’.

The third practice is the assumption and centering of heterosexuality, for example the relationships pictured in books, school hallways and school dances shown as heterosexual or discussions about relationships with the school nurse focusing on if a youth has a significant other, that is described as the opposite sex of the student, rather than referring neutrally for example to a partner (Lehtonen, 2003b). The fourth practice by Lehtonen (2003b) was already somewhat mentioned: the rigid categorization of male and female sexes classified as binary, opposite to one another, showing for example as groups of youth referred to as ‘boys’ and ‘girls’ in the classroom, groups being divided as boys and girls, or mixing of boys and girls in groupwork, hoping they will balance on another out. Moving in a similar theme, in the fifth practice the differences between men and women are emphasized, while at the same time the homogeneity of said groups is also strengthened, e.g., men are active and don’t show emotions while women are passive and are allowed to show their emotions (Lehtonen, 2003b).

With the sixth practice men, boys, and masculinity are placed over women, girls, and femininity (Lehtonen, 2003b). In sexuality education this may show as the pleasure of men being out in the open more often than women’s pleasure (Lehtonen, 2003b). Girls are taught not only to be the opposite to boys but also to only be sexually oriented towards boys (Garcia, 2009). Women are sexualized, but only as a target of the needs of men, while men are sexualized as active sexual beings (Lehtonen, 2003b). A dominance/subordination binary by gender is taught and although female desire and pleasure is more discussed nowadays, the full range of it is not visible in public discussion (Connell & Elliott, 2009). It may also be assumed that within heteronormative practices in sexuality education both male and female desire and pleasure – when discussed - are discussed solely from a heterosexual standpoint, with assumption that the students in the classroom are all heterosexual.

The seventh practice in Lehtonen's (2003b) work heterosexualizes boys, girls, women, men, the spaces used by them and their relationships. For example touch between boys and girls is heterosexualized or a girl and a boy who become friends are thought, hoped or feared to be sexually interested in one another. The eighth practice homosexualizes boys and girls who deviate that which is 'not allowed'. Someone acting differently regarding their gender or sexuality, is stigmatized and homosexualized as gay or lesbian, for example a boy choosing textile work over technical work or a girl cutting her hair short and fighting a lot (Lehtonen, 2003b).

For the ninth practice broken gender roles or sexual orientation by a student or a teacher that is seen as wrong, are controlled, and restricted by teachers, school health care personnel, peers and so on (Lehtonen, 2003b). These actions may be seen as something to be 'fixed' or something to use as a reason to bully, call names or exclude someone outside of a group. The tenth practice includes othering and marginalizing SGMs and seeing them as, again, something to be 'fixed', as sick or their sexual orientation and/or gender identity is seen as something 'that will pass eventually'. SGMs are sexualized and their sexual orientation or differing gender is seen as the base for each of their action and thought (Foucault, 1984 as cited in Lehtonen, 2003b) and are therefore seen as a threat to children and adolescents that they will influence or affect negatively (Lehtonen, 2003b).

Dismantling these practices of heteronormativity may be achieved by naturalizing heterosexuality as one options of sexual orientation instead of a norm and unraveling the centrality of heterosexuality and assumed heterosexuality, for example through naming opposite-sex relationships as heterosexual, bringing visibility and discussion to and about non-heterosexuality or valuing and accepting friendships and romantic relationships without looking at gender or sexual orientation among many other strategies (Lehtonen, 2003b). Inclusive sexuality education with principles in social justice pedagogy framework may be valuable in achieving this.

## 4                   **Towards inclusive sexuality education**

As discussed earlier, there are some main types of sexuality education: abstinence-only programmes focus on abstaining from intercourse before marriage and comprehensive models entail abstinence as an option while also paying attention to contraception and safe sex practice. Holistic models, such as the inclusive one in the following text, broaden in addition into the wider range of personal and sexual development. While abstinence-only and comprehensive models of sexuality education differ on their stance related to marriage, the latter being more open to premarital sex, both “rely on fear-based and oppressive conceptualizations of sexuality that perpetuate inequality” (Connell & Elliott, 2009, p. 97). There is wide support to use inclusive sexuality education to combat social injustice with a framework described to be based in social justice and/or human rights, sometimes also referred to as rights-based framework (see Carrera-Fernández, Lameiras-Fernández, Blanco-Pardo & Rodríguez-Castro, 2021; Connell & Elliott, 2009; Goldfarb & Lieberman, 2021; Hobaica & Kwon, 2017; Schalet et al., 2014). A social justice lens utilizes ideas of human rights and equality to confront “power, privilege, and structural and systemic discrimination of marginalized communities” (Goldfarb & Lieberman, 2021, p. 19). Rights-based frameworks have many different names, but they all share the common belief that “issues of sexuality, sexual health, sexual rights and gender need to be addressed together to prepare youth to make positive, informed and responsible choices throughout their sexual lives” (Berglas, Constantine & Ozer, 2014, p. 64). Using these frameworks has become increasingly popular and they have also been backed by prominent sexual health organizations (UNESCO, 2018 as cited in Goldfarb & Lieberman, 2021; American School Health Association, 2012) and research has shown these approaches to be well-founded and to have positive outcomes (Goldfarb & Lieberman, 2021). Research has shown that curricula inclusive of SGMs, especially within comprehensive sexuality education, would reduce homophobic bullying and harassment, increasing safety for SGMs (Goldfarb & Lieberman, 2021; Proulx et al., 2019).

These four core elements for rights-based sexuality education were shaped by using in-depth interviews done with 21 U.S. and international sexuality education experts (Berglas et al., 2014). Firstly, the **underlying principle** of rights-based sexuality education should be an agreement that youth have rights that have been written in international human rights laws, which must be considered when teaching and giving access to or keeping access from sexuality education and its contents. Recognizing these rights brings sexuality education to a more societal and institutional level, as this recognition should then oblige for actions from adults, governments, and organizations to ensure that youth have access and tools to protect their and their partner's health and rights. Secondly, this framework of sexuality education should have **expanded goals**, going beyond discouraging sex before and outside of marriage, pregnancy, and STD prevention. The aim should also be for health overall, the multiple dimensions of health, leading to the questioning of the usual disease-prevention model. Thirdly, the **broadened content** of this sexuality education model names all the areas that affect and are affected by sexuality, for example the cultural and social aspects and discussing healthy relationship. Gender should also be addressed as a core aspect of sexuality education rather than a separate entity as gender equality and gender norms are primary parts of a rights-based approach. And fourth, a **youth-centered pedagogy**, an involved and interactive model is preferred instead of the usual didactic one. Adolescents will have tools to combat, for example, heteronormative voices or gender norms that are telling them how they should be and who they are. Merely informing about rights is seen as lacking and surface level. Rather, discussion, action, critical thinking, and reflection was encouraged both internationally and in the States. International experts emphasized social empowerment, seeking for making political and societal changes over individual liberation (Berglas et al., 2014).

Another framework which has been suggested to be useful as a crucial element of sexuality education is social and emotional learning (SEL) (Collaborative for Academic, Social, and Emotional Learning, 2021), as it helps manage challenging emotions and improve attitudes about students themselves, others, and school (Goldfarb & Lieberman, 2021). By creating a safe climate for discussing controversial and sensitive topics, critical thinking, improved communication skills and increased self-efficacy among other areas have been found to be positive outcomes of rights-based and social justice frameworks (Goldfarb & Lieberman, 2021), SEL being a good tool to create such spaces.

The age when sexuality education starts has often been seen as controversial. This may be because sexuality education is understood and/or taught still very narrowly where for example

exploring one's own body or safety practices are not realized to be part of sexuality education. Sexuality education, however, is the most efficient when it is "begun early and before sexual activity begins" (Goldfarb & Lieberman, 2021, p. 22). Introducing topics such as "sexual orientation, gender identity and expression, gender equality, and social justice related to the LGBTQ community" may be best done at early grades, when for example hetero- and cisnormativity and gender roles and values related to them, have not yet become as deeply ingrained (Goldfarb & Lieberman, 2021, p. 23).

Intersectionality and interculturality should also be seen with these frameworks related to social justice to promote true critique of "cis-heteronormativity and normative ethnocentrism", avoiding the creation of a space of mere toleration, with hegemonic groups only tolerating the other (Carrera-Fernández et al., 2021, p. 1). Incorporating these aspects require self-reflection and critical thinking as well as unlearning the ways one has thought of oneself and the surrounding world for example regarding what is seen as normal and accepted concerning bodies, gender, sexual orientation and relationships in society and school (Staley & Leonardi, 2019). It should be noted however, that inclusion may often be left to on a very surface level, instead of being truly incorporated. New Zealand's sexuality education has been considered very progressive in addressing heteronormativity, being inclusive and linked to social justice and collective action over individualistic change (Fitzpatrick, 2018), and while it has been praised there have also been concerns and critique if it truly is this way or if a liberal assumption of individual is in place, leaving the effects of structures and context unaddressed (Garland-Levett, 2017). Garland-Levett (2017) argues for a shift in policy from personal responsibility and individual change in sexuality education to a focus rather on social change, to "changing the social and political conditions that make sexual subjectivity and empowerment unequally accessible" (p. 132). Either way, this is something to be considered with sexuality education to avoid a liberal surface level inclusion and simple toleration.

#### **4.1 The benefits of inclusive sexuality education**

It has been suggested that with more education and exposure to the normative identities, students are willing to be more accepting of non-normative individuals (Hobaica & Kwon, 2017). An inclusive sexuality education is also described to use nonseparated classrooms, allowing all genders to learn what other students are feeling and experiencing. It is said this may also reduce the invisibility of trans and gender nonconforming students. An inclusive sexuality education



has been argued to be crucial in making sexual minority identities visible and lessen confusion as they may find a label for their sexual identity, breaking free from silence and not having to see themselves as different from their peers (Hobaica & Kwon, 2017).

Hobaica & Kwon (2017) also discuss how addressing other forms of sex and more diverse identities helps not only SGMs but all students with their future decisions in sexual relationships and issues related to health. As has been mentioned about privileged access not only to the Internet but also to contact with other SGMs and/or access to college courses where such themes are discussed more, inclusive school sexuality education would provide more accessible, safe, and scientifically accurate, essential information for SGMs (Hobaica & Kwon, 2017). With more up-to-date information available, more students would understand their sexual identities at a younger age, therefore limiting “sexual confusion, hesitance and internalized stigma” as well as health risks such as depression and anxiety by increasing “resilience, self-efficacy and identity confidence” (Hobaica & Kwon, 2017, p. 445-446). It is also suggested that bullying would decrease, and research has reported results of increased knowledge, appreciation and awareness of gender equity and sexual rights, breaking down stereotypes as well as awareness of the discrimination and oppression faced by SGMs (Goldfarb & Lieberman, 2021; Hobaica & Kwon, 2017).

## **4.2 Challenges**

Besides the danger of practicing a liberal inclusive education without social change, interviews by Hobaica & Kwon (2017) discuss the fear that SGMs would become more bullied with increasing negative interactions. This has however also been reviewed not to be an acceptable reason to refrain from teaching these themes, as it would keep excluding SGMs and SGM themes from the curriculum, further silencing them. It can also be considered that inclusive education could reduce bullying as with more knowledge, there would be less tolerance towards bullying of minority students. Concerns may also rise from thinking some parents may oppose or be dissatisfied with a ‘liberal agenda’, although it should be seen that including and giving a voice to identities in the classroom should always be encouraged and expected, and not seen as a liberal or progressive ideology (Hobaica & Kwon, 2017).

Regarding resources, especially time which is often limited for sexuality education, a strategy to implement sexual health concepts throughout other parts of the curriculum has been seen as positive (Goldfarb & Lieberman, 2021). A large issue and concern is related to teacher education. To implement inclusive, rights-based sexuality education, teachers need to have professional training, “high-level facilitation skills, personal comfort with gender and sexuality, and additional content knowledge” (Berglas et al., 2014, p. 67-68). McAllum (2018) argues that a lot of the responsibility for teaching health is within pre-service education and that student teachers need a real opportunity to learn to plan and give the relevant and up to date health programmes students need. Qualified and trained teachers have a huge role and responsibility in delivering sexuality education within the health curriculum (McAllum, 2018).

According to Staley & Leonardi (2019) the administrators, especially local, hold a lot of power in making inclusive sexuality education practices more accepted. If the administrators give a clear message that teaching certain content is a must, staff, teachers, parents and so on are more willing to collaborate. Often though these said administrators themselves have no support to understand and enact said policies and practices which may further problematize implementing inclusive sexuality education (Staley & Leonardi, 2019).

In a study regarding England and Turkey, besides public authorities, non-governmental organizations advocating for rights-based sexuality education and faith-based groups opposing current and possible future policies were seen as important actors in the subject (Yilmaz & Willis, 2020). The case in Finland seems to be that teacher training programmes are mostly “following legal obligations in improving curricula, rather than actively identifying a knowledge gap in teacher training theories and practices regarding gender and sexuality” (Naskali & Kari, 2020, p. 2). Formal plans may be made, but if actors in schools are not committed to practicing these plans, little becomes true in everyday practices (Ikävalko, 2016). An important question is posed by Naskali & Kari (2020): how can teachers welcome all these identities from for example SGM or multicultural background, if their education does not address such themes and the normative ways of thinking related to them in its curriculum?

## 5 Conclusion and discussion

This thesis examined the questions of how traditional sexuality education meets the needs of SGMs and what could a rights-based inclusive sexuality education framework offer in comparison. First in the thesis the core concepts of gender and heteronormativity were defined and examined. By assumption of heterosexuality, the gender of a person is also assumed based on what society deems as male/masculine and female/feminine. When the binary understanding of gender as only male or female goes hand in hand with heteronormativity, normative assumption of heterosexuality and cis identity is prevalent. By examining and understanding the normative, assuming connection between the concept of gender and heteronormativity, the institutional perspective to heteronormativity can be seen and therefore also how it may appear within education, sexuality education and other institutions, such as municipal decision making in Finland. Were this type of normative thinking questioned and named in education, it could possibly push for more critical and open thinking of gender and sexuality. The undecided meaning of queer theory was also discussed, with a reminder to be critical of the context it is applied to (Mizilienska, 2006), nevertheless acknowledging the importance of queer theories to this thesis. The term of sexuality was examined briefly, leading into a discussion of sexuality education and the various motives of different kinds of sexuality education. By understanding the broad meaning of sexuality, the focus from the old-fashioned “abstinence and disease prevention” models can be overcome and a place for inclusive sexuality education can be found and understood better. Recent research and discussion advocate for the results of inclusive sexuality education which include for example reduction in bullying and better understanding of e.g., rights of gender and sexual minorities (Goldfarb & Lieberman, 2021).

Reviewing the Finnish National Core Curriculum 2014 showed how sexuality education is mentioned in it, and while it does technically allow for teaching inclusive sexuality education, it does not advocate for it nor give any instructions in general for teaching sexuality education. The curriculum does not actively instruct or promote for awareness of heteronormativity or such, when specifically naming privileges is a way of breaking the normativity of them as discussed earlier in Lehtonen (2003b). Another point of concern based on these readings is the Finnish teacher education and how well teachers are prepared to teach sexuality education. A discussion in Finland pondering the value of the current prevalent teacher autonomy versus

increased monitoring to possibly assure certain themes are taught, would be valuable. An examination of the current state of education teacher students receive regarding sexuality education may also prove helpful.

The Six Dimensions of Wellness Model (Hettler, 1976) used in this thesis helped discuss and make concrete how heteronormativity affects different aspects of wellbeing of SGMs internationally and in Finland. Interestingly, while otherwise the results were similar internationally and in Finland, a difference in results was found in sobriety: while international research showed SGMs to partake in risky substance abuse more in general or before sex compared to their hetero- and cis-peers, this was not the case in Finnish nationally gathered data. This specific category had no mentionable difference between students belonging to sexual and gender minorities and hetero- and cis-students in Finland.

Based on the literature review done in this thesis, inclusive sexuality education programmes with roots in social justice or rights-based framework may be fruitful in naming and dismantling heteronormativity. The core elements of said model were discussed, in addition to highlighting the possible benefit of socio-emotional learning framework within inclusive sexuality education. The often-debated age for beginning sexuality education and what research has shown in relation to this was examined, concluding in that even though the suggested early starting age may feel like a concern to many, research has shown that starting sexuality education before sexual activity begins is more efficient (Goldfarb & Lieberman, 2021). Introducing and discussing themes related to e.g., LGBTQ+, gender and social justice is also better done in earlier grades when normative values and gender roles have not yet become deeply ingrained (Goldfarb & Lieberman, 2021). Intersectionality and interculturality should be embedded into this model of education as well to help avoid slipping into a framework which is inclusive only on a surface level to appear mediagenic without deeper meaning when trying to implement a truly transformative and critical social justice framework such as rights-based sexuality education.

The health of SGMs is clearly affected by heteronormativity and it would be useful to have more research focusing on this in Finland, as most of the research used here was from elsewhere. It is important to note throughout this whole thesis and especially in dimensions of wellness -section, that while SGMs face struggles, this is not something that applies necessarily to all SGMs and does not define them as persons. Being part of a sexual and/or gender minority does not mean that a person is automatically also for example depressed and even if they are, this is certainly not because they are part of such a group, but either because of such factors as

minority stress, exclusion, and other discrimination that they may face because of their identity, or the case may also be that their sexual orientation or gender identity is not related to their struggles at all. In short, I want there to be an awareness not to assume all SGMs to be suffering since if this is assumed and the thought process when meeting SGM individuals, it may be stigmatizing for the persons.

There was a lack of or a difficulty of finding academic, recent, peer-reviewed articles relating to the researched themes in Finland, which may have limited this literature review or produced a view that has a strong base on research done especially in the United States, where a lot of queer theory for example emerges from. Most of the literature used however has been academic, peer reviewed and recent, advocating for the reliability of the results of this thesis and portraying different views of sexuality education.

Making this thesis has been fruitful but also mentally taxing through personal identity being so close to the themes discussed. I believe this fact may have unconsciously produced certain views in the text or focuses and viewpoints on certain topics and caused the thesis to be possibly lacking in the writing or material used. Nevertheless, the identity of the author is also an important and valuable part for constructing the thesis and in reviewing the articles used in the thesis, this specific identity pushing for an important aspect of queer theory, by bringing ‘queer commentary’ as described by Berlant & Warner (1995) into academia, highlighting the importance of the presenting and acknowledging the identity of an author especially in themes such as presented in this thesis. Clearly it is still only one perspective and cannot speak for all, but rather invites and encourages for discussion and reflection of which voices are dominant in the field.

In future it would be crucial to investigate how well teachers are prepared for teaching sexuality education if at all. It would also be helpful in the future to research how SGMs in Finland, students and teachers, experience learning and teaching sexuality education, as there is a lack of information in this area. More and updated qualitative research for the perspective of SGMs’ experiences in school in general could also be meaningful, seeing there is some quantitative national level research (see Jokela et al., 2020), but not much qualitative research. With updated qualitative research, it would be seen how especially sexual and gender minority youth experience sexuality education and what they expect from it. While Finland and the Finnish school system is prided in being inclusive and supportive of all, the system should be reflected upon

and researched through an intersectional lens and see the heteronormativity, among other privileges, that dominate the discussion.

Luckily there are for example great organizations that provide materials and education for teaching inclusive sexuality education and queer perspective for sexuality education, such as *SETA – LGBTI Rights in Finland* (Seta) and *The Swedish Association for Sexuality Education* (RFSU). Seta provides education for teachers of all age ranges from early childhood education to secondary education (Seta ry, 2021b), materials such as a free guidebook called *Seksuaalisen suuntautumisen ja sukupuolen moninaisuus – Opitaan yhdessä! [Diversity of sexuality and gender – Let’s learn together!]* among others and consultation for applying the National curriculum from a ‘rainbow viewpoint’ (Seta ry, 2021c). RFSU also has free material called *Sex, Body & Rights* suitable for teaching students in secondary school as well as higher education, among other useful materials (RFSU, 2020). The recently formed Trans registered association is also doing important work in Finland creating a community for trans people and naming out the missteps in society affecting the trans community in daily life and political levels (Mollgren, 2020), having pushed forward for example the *Oikeus olla (The Right to Be)* -citizens’ initiative for a more just trans law. Using the services provided by such organizations may be helpful and even crucial for the moment while a more transformative push happens in institutional level, e.g., in teacher education programmes and the curriculum.

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